



COMBINATION DECLARATION & POWER OF ATTORNEY

COPY OF PAPERS
ORIGINALLY FILED

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled „Masking tape and its use“ the specification of which is attached hereto.

-OR-

was filed on 04/27/2001 as

Application Serial No. 09/844,083 and was amended _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

100 21 243.3
(Number)

Germany
(Country)

29/04/2000
(Day/Month/Yr. Filed)

Priority Claimed

[X] yes [] no

(Number)

(Country)

(Day/Month/Yr. Filed)

[X] yes [] no

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)

(Filing Date)

(Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named Inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Kurt G. Binscoe, Reg. No. 33,141; William C. Gerstenzang, Reg. No. 27,552; Carmella A. O'Gorman, Reg. No. 33,749; and Stephen G. Ryan, Reg. No. 39,015 all of 220 East 42nd Street, 30th Floor, New York, New York 10017; William R. Robinson, Reg. No. 27,224; Mark A. Montana, Reg. No. 44,948 all of 721 Route 202-206, Bridgewater, New Jersey 08807; Lorimer P. Brooks, Reg. No. 15,155; Davy E. Zoneraich, Reg. No. 37,267 all of 805 Third Avenue, 9th Floor, New York, NY 10022, my attorneys with full power of substitution and revocation.

U.S. PATENT & TRADEMARK OFFICE
JAN 25 2002

Send Correspondence To: Norris McLaughlin & Marcus, P.A. 220 East 42 nd Street 30 th Floor New York, N. Y. 10017	Direct Telephone Calls To: (212) 808-0700
---	---

COPY OF PAPERS
ORIGINALLY FILED

Full Name Of Sole or First Inventor Oliver Nickel	Inventor's Signature <i>Oliver Nickel</i>	Date 13.12.01
Residence Kösterbergstraße 2, D-22587 Hamburg, Germany	Citizenship German	
Post Office Address Kösterbergstraße 2, D-22587 Hamburg, Germany		
Full Name Of Second Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		
Full Name Of Third Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		
Full Name Of Fourth Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		
Full Name Of Fifth Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		
Full Name Of Sixth Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		
Full Name Of Seventh Inventor	Inventor's Signature	Date
Residence	Citizenship	
Post Office Address		